CHILDREN DENTAL SERVICES

Procedure Codes* and Allowances

Effective 07/01/2013

Updated 09/25/2013

| PROCEDURE DIAGNOSTIC | CODE | FEE |
|--|----------------|-------------------------|
| PERIODIC ORAL EXAM PROBLEM FOCUSED EXAM | D0120 D0140 | \$22.26 \$33.39 |
| ORAL EVAL FOR PATIENT UNDER 3 YRS | D0145 | \$24.29 |
| COMPREHENSIVE ORAL EXAM EXTENSIVE ORAL EVALUATION | D0150 D0160 | \$33.39 \$35.89 |
| RADIOGRAPHS | D0040 | \$ 00.00 |
| INTRAORAL COMPLETE WITH BITEWINGS INTRAORAL PERIAPICAL 1ST FILM | D0210 D0220 | \$69.82 \$13.16 |
| INTRAORAL PERIAPICAL EACH ADD FILM | D0230 | \$9.11 |
| OCCLUSAL FILM | D0240 | \$14.17 |
| BITEWINGS 1 FILM BITEWINGS 2 FILMS | D0270 D0272 | \$13.16 \$21.25 |
| BITEWINGS 2 FILMS BITEWINGS 3 FILMS | D0272 | \$23.93 |
| BITEWINGS 4 FILMS | D0274 | \$28.33 |
| VERTICAL BITEWINGS 7-8 FILMS | D0277 | \$32.90 |
| PANORAMIC FILM CEPHALOMETRIC FILM | D0330 D0340 | \$54.65 \$51.84 |
| ORAL/FACIAL IMAGES | D0340 D0350 | \$23.27 |
| DIAGNOSTIC CASTS | D0470 | \$48.85 |
| PREVENTIVE PROPUNICANIA (40 MEA PO OR OLDER) | D4440 | # 40.50 |
| PROPHYLAXIS (12 YEARS OR OLDER) PROPHYLAXIS (UNDER 12 YEARS OLD) | D1110 D1120 | \$42.50 \$30.36 |
| TROTTILIONO (ONDER 12 TEARS OLD) | D1120 | ψ50.50 |
| TOPICAL FLUORIDE TREATMENT | | _ |
| TOPICAL APPLICATION OF FLUORIDE | D1208 | \$18.22 |
| TOPICAL FLUORIDE VARNISH | D1206 | \$18.22 |
| OTHER PREVENTATIVE SERVICES | | |
| ORAL HYGIENE (with ABCD training and certification) | D1330 | \$24.93 |
| SEALANT (PER TOOTH/TO AGE 15) | D1351 | \$24.29 |
| SPACE MAINTENANCE | D | * 400.0 = |
| FIXED UNILATERAL FIXED BILATERAL | D1510 D1515 | \$139.65 \$213.52 |
| REMOVABLE UNILATERAL | D1510 | \$107.27 |
| REMOVABLE BILATERAL | D1525 | \$199.36 |
| RECEMENTING OF SPACE MAINTAINER | D1550 | \$37.44 |
| AMALGAM RESTORATIVE | | |
| AMALGAM, ONE SURFACE | D2140 | \$58.69 |
| AMALGAM, TWO SURFACES AMALGAM, THREE SURFACES | D2150 D2160 | \$72.86 \$88.04 |
| AMALGAM, FOUR SURFACES | D2161 | \$105.24 |
| | | |

| RESIN RESTORATIONS | | |
|---|--------------------|----------|
| RESIN ONE SURFACE, ANTERIOR | D2330 | \$66.79 |
| RESIN TWO SURFACES, ANTERIOR | D2330 | \$86.02 |
| RESIN THREE SURFACES, ANTERIOR | D2332 | \$106.26 |
| RESIN FOUR OR MORE SURFACES, ANTERIOR | D2335 | \$125.48 |
| RESIN-BASED COMPOSITE CROWN | D2390 | \$155.84 |
| RESIN ONE SURFACE, POSTERIOR | D2391 | \$58.69 |
| RESIN TWO SURFACES, POSTERIOR | D2392 | \$72.86 |
| RESIN THREE SURFACES, POSTERIOR | D2393 | \$88.04 |
| RESIN FOUR SURFACES, POSTERIOR | D2394 | \$105.24 |
| RESILT CON CONTROLS, I COTEMON | D2001 | φ100.21 |
| PROSTHETHICS (CROWNS) | | |
| RESIN/PREDOMINANTLY BASE METAL | D2721 | \$368.35 |
| PORCELAIN/CERAMIC SUBSTRATE CROWN | D2740 | \$465.50 |
| PORCELAIN/HIGH NOBLE METAL CROWN | D2750 | \$465.50 |
| PORCELAIN/BASE METAL CROWN | D2751 | \$465.50 |
| PORCELAIN/NOBLE METAL CROWN | D2752 | \$465.50 |
| FULL CAST HIGH NOBLE METAL CROWN | D2790 | \$465.50 |
| FULL CAST CROWN | D2791 | \$465.50 |
| FULL CAST NOBLE METAL CROWN | D2792 | \$465.50 |
| REPLACEMENT INLAY/ONLAY/PARTIAL COVERAGE RESTORATION | D2910 | \$23.93 |
| RECEMENT CROWN | D2920 | \$43.51 |
| PREFAB STAINLESS STEEL CROWN-PRIM | D2930 | \$125.48 |
| PREFAB STAINLESS STEEL CROWN-PERM | D2931 | \$134.59 |
| PREFAB RESIN CROWN | D2932 | \$131.55 |
| PREFAB SSC/RESIN WINDOW | D2933 | \$167.98 |
| SEDATIVE FILLING | D2940 | \$45.54 |
| CROWN BUILDUP INCLUDING ANY PINS | D2950 | \$105.24 |
| PIN RETENTION | D2951 | \$19.23 |
| CAST POST & CORE IN ADDITION TO CROWN | D2952 | • |
| PREFABRICATED POST/CORE IN ADDITION | D2954 | \$149.77 |
| LABIAL VENEER | D2962 | \$455.63 |
| LADIAL VENEER | DZJOZ | ψ-100.00 |
| ENDODONTICS | | |
| PULP CAP (DIRECT) | D3110 | \$36.43 |
| PULP CAP (INDIRECT) | D3120 | \$33.39 |
| PULPOTOMY (PRIMARY TEETH ONLY) | D3220 | \$66.79 |
| PULPAL DEBRIDEMENT | D3221 | \$56.67 |
| PULPAL THERAPY ANTERIOR | D3230 | \$61.73 |
| PULPAL THERAPY POSTERIOR | D3240 | \$66.79 |
| ROOT CANAL THERAPY (ANTERIOR) | D3310 | \$318.77 |
| ROOT CANAL THERAPY (BICUSPID) | D3320 | \$378.47 |
| ROOT CANAL THERAPY (MOLAR) | D3330 | \$497.88 |
| RETREATMENT OF ROOT CANAL (ANTERIOR) | D3346 | \$318.77 |
| RETREATMENT OF ROOT CANAL (BICUSPID) | D3347 | \$378.47 |
| RETREATMENT OF ROOT CANAL (MOLAR) | D3348 | \$497.88 |
| APEX/RECALCIFICATION-INITIAL VISIT | D3351 | \$101.20 |
| APEX/RECALCIFICATION-NEXT VISIT | D3352 | \$101.20 |
| APEX/RECALCIFICATION-FINAL VISIT | D3353 | \$144.71 |
| APICOECTOMY (ANTERIOR) | D3333 | \$263.11 |
| APICOECTOMY (MOLAR) | D3410 | \$299.54 |
| APICOECTOMY (MOLAR) APICOECTOMY (EACH ADDITIONAL ROOT) | D3425 | \$107.27 |
| RETROGRADE FILLING | D3420 | \$83.99 |
| NE INCONADE I ILLINO | D3 4 30 | ψυυ. 33 |

| PERIODONTICS | | |
|--|-------|----------------|
| EXTRACORONAL PROVISIONAL SPLITTING | D4321 | \$81.75 |
| ROOT PLANING AND SCALING (4+ TEETH) | D4341 | \$127.51 |
| ROOT PLANING AND SCALING (0-3 TEETH) | D4342 | \$76.91 |
| FULL MOUTH DEBRIDEMENT | D4355 | \$85.74 |
| PERIODONTAL MAINTENANCE | D4910 | \$66.79 |
| | 2.0.0 | Ψσσσ |
| PROSTHODONTICS | | |
| COMPLETE UPPER DENTURE | D5110 | \$683.07 |
| COMPLETE LOWER DENTURE | D5120 | \$683.07 |
| IMMEDIATE UPPER DENTURE | D5130 | \$727.60 |
| IMMEDIATE LOWER DENTURE | D5140 | \$727.60 |
| UPPER ACRYLIC PARTIAL | D5211 | \$662.83 |
| LOWER ACRYLIC PARTIAL | D5212 | \$662.83 |
| UPPER CAST PARTIAL | D5213 | \$662.83 |
| LOWER CAST PARTIAL | D5214 | \$662.83 |
| UPPER FLEX PARTIAL | D5225 | \$662.83 |
| LOWER FLEX PARTIAL | D5226 | \$662.83 |
| ADJUST COMPLETE UPPER DENTURE | D5410 | \$28.33 |
| ADJUST COMPLETE LOWER DENTURE | D5411 | \$28.33 |
| ADJUST UPPER PARTIAL DENTURE | D5421 | \$28.33 |
| ADJUST LOWER PARTIAL DENTURE | D5422 | \$28.33 |
| REPAIR BROKEN COMPLETE DENTURE | D5510 | \$72.86 |
| REPLACE MISSING/BROKEN TEETH | D5520 | \$60.72 |
| REPAIR ACRYLIC SADDLE OR BASE | D5610 | \$75.90 |
| REPAIR CAST FRAMEWORK | D5620 | \$118.40 |
| REPAIR OR REPLACE BROKEN CLASP | D5630 | \$128.52 |
| REPLACE BROKEN TEETH (PER TOOTH) | D5640 | \$69.82 |
| ADD TOOTH TO EXISTING PARTIAL | D5650 | \$109.29 |
| ADD CLASP TO EXISTING PARTIAL | D5660 | \$106.26 |
| REBASE COMPLETE UPPER DENTURE | D5710 | \$256.02 |
| REBASE COMPLETE LOWER DENTURE | D5711 | \$256.02 |
| RELINE UPPER COMPLETE DENTURE | D5730 | \$141.67 |
| RELINE LOWER COMPLETE DENTURE | D5731 | \$141.67 |
| RELINE UPPER PARTIAL DENTURE | D5740 | \$141.67 |
| RELINE LOWER PARTIAL DENTURE | D5741 | \$141.67 |
| RELINE UPPER COMPLETE DENTURE | D5750 | \$227.69 |
| RELINE LOWER COMPLETE DENTURE | D5751 | \$227.69 |
| RELINE UPPER PARTIAL DENTURE | D5760 | \$227.69 |
| RELINE LOWER PARTIAL DENTURE | D5761 | \$227.69 |
| TEMPORARY COMPLETE DENTURE (U) | D5810 | \$352.16 |
| TEMPORARY COMPLETE DENTURE (L) | D5811 | \$352.16 |
| TEMPORARY UPPER PARTIAL | D5820 | \$272.22 |
| TEMPORARY LOWER PARTIAL | D5821 | \$272.22 |
| TISSUE CONDITIONING-MAXILLARY | D5850 | \$52.62 |
| TISSUE CONDITIONING-MANDIBULAR | D5851 | \$52.62 |
| OVERDENTURE – COMPLETE (cusil-only) | D5860 | \$683.07 |
| REPORT REMOVABLE PROSTHODONTIC PROCEDURE | D5899 | \$421.73 |
| RECEMENT BRIDGE | D6930 | \$66.80 |
| ODAL GUDGERY | | |
| ORAL SURGERY | D7444 | 0.40.50 |
| CORONAL REMNANTS-DECIDIOUS TOOTH | D7111 | \$49.59 |
| EXTRACTION SINGLE TOOTH | D7140 | \$65.78 |

| SURGICAL REMOVAL ERUPTED TOOTH SURGICAL REMOVAL TISSUE IMPACTED SURGICAL REMOVAL PARTIALLY BONY SURGICAL REMOVAL FULL BONY SURGICAL REMOVAL UNUSUAL COMP. SURGICAL REMOVAL RESIDUAL ROOTS TOOTH RE-IMPLANTATION | D7210 D7220 D7230 D7240 D7241 D7250 D7270 | \$184.18 \$223.64 \$266.14 \$122.45 |
|---|---|--|
| OTHER SURGICAL PROCEDURES SURGICAL ACCESS OF UNERUPTED TOOTH DEVICE TO FACILITATE ERUPTION OF IMPACTED TOOTH BIOPSY OF ORAL TISSUE – HARD BIOPSY OF ORAL TISSUE – SOFT BRUSH BIOPSY | D7280 D7283 D7285 D7286 D7288 | \$204.41 \$137.63 \$160.90 \$141.67 \$22.93 |
| ALVEOLOPLASTY IN CONJUNCTION WITH EXTRACTIONS (PER QUADRANT) IN CONJUNCTION WITH EXTRACTIONS (ONE TO THREE TEETH, PER QUADRANT) NOT IN CONJUNCTION WITH EXTRACTIONS NOT IN CONJUNCTION WITH EXTRACTIONS (ONE TO THREE TEETH, PER QUADRANT) | D7310 D7311 D7320 D7321 | \$106.26 \$69.82 \$125.48 \$88.04 |
| VESTIBULOPLASTY UNCOMPLICATED (PER ARCH) COMPLICATED (PER ARCH) | D7340 D7350 | \$136.61 \$265.13 |
| EXCISION OF BONE TISSUE REMOVAL OF EXOSTOSIS (PER SITE) REMOVAL OF TORUS PALATINUS REMOVAL OF TORUS MANDIBULARIS SURGICAL REDUCTION OF OSSEOUS TUBEROSITY | D7471 D7472 D7473 D7485 | • |
| SURGICAL INCISION Incision and drainage of abscess-intraoral soft tissue Incision and drainage of abscess-extraoral soft tissue | 7510 7520 | \$99.17 \$135.60 |
| TREATMENT OF FRACTURES ALVEOLUS, CLOSED REDUCTION STABILIZATION OF TEETH | D7771 | \$667.89 |
| OTHER REPAIR PROCEDURES FRENULOPLASTY Frenulectomy (frenectomy or frenotomy); separate procedure | D7963 7960 | \$232.75 \$166.97 |
| LIMITED ORTHODONTICS (Requires Special Authorization) LIMITED TREATMENT OF PRIMARY DENTITION LIMITED TREATMENT OF TRANSITIONAL DENTITION LIMITED TREATMENT OF ADOLESCENT DENTITION LIMITED TREATMENT OF ADULT DENTITION INTERCEPTIVE TREATMENT OF PRIMARY DENTITION INTERCEPTIVE TREATMENT OF TRANSITIONAL DENTITION COMPREHENSIVE TREATMENT OF TRANSITIONAL DENTITION COMPREHENSIVE TREATMENT OF ADOLESCENT DENTITION COMPREHENSIVE TREATMENT OF ADULT DENTITION REMOVABLE APPLIANCE THERAPY FIXED APPLIANCE THERAPY | D8060 D8070 D8080 | \$793.61 \$961.11 \$998.99 \$1,610.02 \$1,610.02 \$2,983.24 \$3,410.29 \$3,693.64 \$382.85 |

| REPAIR OF ORTHODONTIC APPLIANCE | D8691 | \$55.83 |
|--|-------|----------|
| REPLACEMENT OF LOST/BROKEN RETAINER | D8692 | \$87.74 |
| DIAGNOSTIC WORKUP WITH X-RAY MODELS | D8999 | \$35.89 |
| | | |
| ADJUNCTIVE GENERAL SERVICES | | |
| EMERGENCY TREATMENT PAIN | D9110 | \$52.62 |
| GENERAL ANESTHESIA (30 MINS) | D9220 | \$157.86 |
| GENERAL ANESTHESIA (ADD 15 MIN) | D9221 | \$78.93 |
| ANALGESIA | D9230 | \$29.35 |
| I.V. SEDATION (30 mins) | D9241 | \$123.46 |
| I.V. SEDATION (each additional 15 mins) | D9242 | \$70.84 |
| HOUSE CALL/EXTENDED CARE FACILITY | D9410 | \$36.43 |
| HOSPITAL CALL | D9420 | \$118.40 |
| OFFICE VISIT | D9430 | \$22.26 |
| DRUGS OR MEDICAMENTS | D9630 | \$8.97 |
| POSTSURGICAL TREATMENT OF COMPLICATIONS | D9930 | \$23.93 |
| ODONTOPLASTY 1-2 TEETH, INCLUDES REMOVAL OF ENAMEL PROJECTIONS | D9971 | \$39.88 |
| | | |
| BEHAVIOR MANAGEMENT | | |
| DD PATIENTS ONLY | D9920 | \$85.00 |

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Applicable FARS/DFARS Apply.

MEDICAL-DENTAL PROCEDURES*

This manual contains a listing of codes which can be classified as either medical or dental procedures. All of these services will require prior authorization before the services are performed to determine if the claim will be filed under Dakota XIX or filed with Medical Services within the Department of Social Services

In order for TMJ procedures to be covered under the Dakota XIX program, the problem must be specifically related to the dental malocclusion.

MEDICAL-DENTAL PROCEDURE CODES/ALLOWANCES

| Procedure description | Code | Fee |
|---|------|----------|
| RADIOGRAPHS | | |
| Temporomandibular joint arthogram, including injection | 320 | \$205.43 |
| Other TMJ films, by report | 321 | \$91.08 |
| Tomographic survey | 322 | \$127.51 |
| PERIODONTICS | | |
| Gingivectomy or gingivoplasty (four or more contiquous teeth) | 4210 | \$213.52 |
| Gingivectomy or gingivoplasty (one to three contiquous teeth) | 4211 | \$81.97 |
| Gingival flap procedure (four or more contiquous teeth) | 4240 | \$413.89 |
| Gingival flap procedure (one to three contiquous teeth) | 4241 | \$256.02 |
| Osseous surgery (four or more contiquous teeth) | 4260 | \$539.37 |
| Osseous surgery (one to three contiquous teeth) | 4261 | \$526.22 |
| Pedicle soft tissue graft procedure | 4270 | \$406.81 |
| Free soft tissue graft procedure | 4271 | \$392.64 |
| Periodontal scaling/root planing, four or more teeth (requires prior authorization) | 4341 | \$127.51 |

| Periodontal scaling/root planning, one to three teeth (requires prior authorization) | 4342 | \$76.91 |
|--|--------------|-----------------|
| ORAL SURGERY | | |
| Oroantral fistula closure | 7260 | \$517.11 |
| Surgical exposure of impacted/unerupted tooth | 7280 | \$204.41 |
| Placement of device to facilitate eruption of impacted tooth | 7283 | \$137.63 |
| Biopsy of oral tissue (hard) | 7285 | \$160.90 |
| Biopsy of oral tissue (soft) | 7286 | \$141.67 |
| Surgical repositioning of teeth, by report | 7290 | \$218.58 |
| Transseptal fiberotomy, by report | 7291 | \$112.33 |
| Excision of benign lesion up to 1.25 cm | 7410 | \$143.70 |
| Excision of benign lesion over 1.25 cm | 7411 | \$177.09 |
| Excision of benign lesion, complicated | 7412 | \$384.54 |
| Excision of malignant lesion up to 1.25 cm | 7413 | \$431.09 |
| Excision of malignant lesion over 1.25 cm | 7414 | \$755.93 |
| Excision of malignant lesion, complicated | 7415 | \$755.93 |
| Excision of malignant tumor-lesion diameter up to 1.25 cm | 7440 | \$366.33 |
| Excision of malignant tumor-lesion diameter over 1.25 cm | 7441 | \$295.49 |
| Removal of benign odontogenic cyst or tumor-lesion diameter up to 1.25 cm | 7450 | \$235.79 |
| | | |
| SURGICAL EXCISIONS Removal of benign odontogenic cyst or tumor-lesion diameter over 1.25 cm | 7451 | \$235.79 |
| Removal of benign nonodontogenic cyst of tumor-lesion diameter up to 1.25 cm | 7460 | \$235.79 |
| Removal benign nonodontogenic cyst or tumor-lesion diameter dy to 1.25 cm | 7460 7461 | \$496.87 |
| Kemoval benigh horiodonlogenic cyst of tumor-lesion diameter over 1.25 cm | 7401 | Ф490.0 7 |
| Destruction of lesion by physical methods: electro-surgery, chemo-therapy, cryotherapy, or laser | 7465 | \$183.16 |
| Radical resection of mandible with bone graft | 7490 | \$1,935.87 |
| INCISION AND DRAINAGE OF ABCESS, INTRAORAL SOFT TISSUE | D7511 | \$217.57 |
| INCISION AND DRAINAGE OF ABCESS, EXTRAORAL SOFT TISSUE | D7521 | \$301.56 |
| Removal of foreign body, skin, or subcutaneous areolar tissue | 7530 | \$145.72 |
| Removal of reaction-producing foreign bodies-musculoskeletal system, by report | 7540 | \$370.38 |
| Sequestrectomy for osteomyelitis | 7550 | \$868.26 |
| Maxillary sinusotomy for removal of tooth fragment or foreign body | 7560 | \$1,105.05 |
| TREATMENT OF FRACTURES-SIMPLE | | |
| Maxilla-open reduction | 7610 | \$1,515.91 |
| Maxilla-closed reduction | 7620 | \$1,200.18 |
| Mandible-open reduction | 7630 | \$1,647.46 |
| Mandible-closed reduction | 7640 | \$1,254.82 |
| Malar and/or zygomatic arch-open reduction | 7650 | \$1,768.90 |
| Malar and/or zygomatic arch-closed reduction | 7660 | \$1,396.50 |
| Alveolus –closed reduction stabilization of teeth | 7670 | \$475.62 |
| Alveolus –open reduction stabilization of teeth | 7671 | \$1,309.47 |
| Facial bones-complication reduction with fixation and multiple surgical approaches | 7680 | \$2,674.60 |
| TREATMENT OF FRACTURES-COMPOUND | | |
| Maxilla-open reduction | 7710 | \$2,221.24 |
| Maxilla-closed reduction | 7720 | \$1,288.22 |
| Mandible-open reduction | 7730 | \$2,221.24 |
| Mandible-closed reduction | 7740 | \$1,313.52 |
| Malar and/or zygomatic arch- open reduction | 7750 | \$1,920.69 |
| Malar and/or zygomatic arch-closed reduction | 7760 | \$1,542.22 |
| Alveolus-stabilization of teeth-open reduction splinting | 7770 | \$1,200.18 |
| Facial bones-complicated reduction with fixation and multiple surgical approaches | 7780 | \$1,289.23 |
| | | |

| REDUCTION OF DISLOCATION AND MANAGEMENT OF OTHER TMJ DYSFUNCTIONS | | |
|--|------|------------|
| Open reduction of dislocation | 7810 | \$1,589.78 |
| Closed reduction of dislocation | 7820 | \$1,138.45 |
| Manipulation under anesthesia | 7830 | \$221.62 |
| Condylectomy | 7840 | 51.5% |
| Surgical discectomy; with or without implant | 7850 | 51.5% |
| Disc repair | 7852 | 51.5% |
| Synovectomy | 7854 | 51.5% |
| Myotomy | 7856 | 51.5% |
| Joint reconstruction | 7858 | 51.5% |
| Arthrotomy | 7860 | 51.5% |
| Arthoplasty | 7865 | 51.5% |
| Arthrocentesis | 7870 | 51.5% |
| Arthroscopy-diagnosis; with or without biopsy | 7872 | 51.5% |
| Arthroscopy-surgical; lavage and lysis of adhesions | 7873 | 51.5% |
| Arthroscopy-surgical; disc repositioning and stabilization | 7874 | 51.5% |
| Arthroscopy-surgical; synovectomy | 7875 | 51.5% |
| Arthroscopy-surgical; discectomy | 7876 | 51.5% |
| Arthroscopy-surgical; debridement | 7877 | 51.5% |
| Occlusal orthotic appliance, by report | 7880 | \$303.59 |
| Unspecified TMD therapy, by report | 7899 | \$249.25 |
| Suture (repair) of recent small wounds up to 5 cm | 7910 | \$85.00 |
| Suture (complicated) up to 5 cm | 7911 | \$141.67 |
| Suture (complicated) over 5 cm | 7912 | \$183.16 |
| Skin grafts (identify defect covered, location, type), by report | 7920 | \$421.99 |
| Osteoplasty- for orthognathic deformities | 7940 | \$2,077.54 |
| Osteotomy- mandibular rami | 7941 | \$3,012.59 |
| Osteotomy- mandibular rami with bonegraft, includes obtaining the graft | 7943 | \$2,891.16 |
| Osteotomy- segmented or subapical, per sextant or quad | 7944 | \$2,293.09 |
| Osteotomy- body of mandible | 7945 | \$2,784.90 |
| LeFort I (maxilla-total) | 7946 | \$2,960.98 |
| LeFort I (maxilla-segmented) | 7947 | \$3,118.85 |
| LeFort II or LeFort III (osteoplasty of facial bones, w/o bone graft) | 7948 | 51.5% |
| LeFort II or LeFort III - with bone graft | 7949 | 51.5% |
| Graft of mandible (osseous, osteoperiosteal, or cartilage graft of mandible-nonautogenous or | | |
| autogenous) | 7950 | 51.5% |
| Repair of maxillofacial soft or hard tissue defect | 7955 | \$1,457.22 |
| Excision of hyperplastic tissue, per arch | 7970 | \$174.06 |
| Excision of pericoronal gingiva | 7971 | \$75.90 |
| Sialolithotomy | 7980 | \$1,027.13 |
| Excision of salivary gland | 7981 | \$877.36 |
| Sialodochoplasty | 7982 | \$1,009.93 |
| Closure of salivary fistula | 7983 | 51.5% |
| Emergency tracheotomy | 7990 | 51.5% |
| Coronoidectomy | 7991 | 51.5% |
| Eminenectomy | 7992 | 51.5% |
| Unspecified oral surgery procedure, by report | 7999 | 51.5% |
| MISCELLANEOUS SERVICES | | |
| Occlusal guard, by report | 9940 | \$142.69 |
| | | |

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